

IDRC and ENGENDER Asian and Pacific Regional Workshop

on

Gender, Health and Sustainable Development

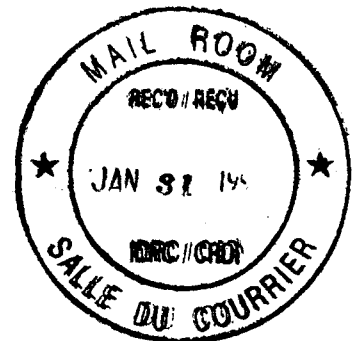


24 - 27 JANUARY 1995
REGIONAL ENGLISH LANGUAGE CENTRE
(RELC)
SINGAPORE



Jointly organised by:
The International Development
Research Centre (IDRC) and
The Centre for Environment,
Gender and Development
(ENGENDER)

In collaboration with:
The Global Commission on
Women's Health (WHO) and
The Special Programme for Research
and Training in Tropical Diseases (TDR)



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Gender, Health and Sustainable Development: an Introduction

The central objective of this workshop is to challenge health researchers, NGOs and policy-makers to actively incorporate within their research, activities and policy work, the interrelated dimensions of gender and sustainable development. Participants will therefore be encouraged to re-examine their research aims, directions and methods, so that states of well-being and ill health will be seen in connection to particular types of development processes, to war consequences and to the effects of the gender hierarchy. This will aptly contextualise the phenomenon of health within the broader terms which frame the conditions and forces impacting on people's lives.

Why focus on gender in health research?

Disseminating knowledge about more gender-sensitive research methodology and development processes is the overriding aim of this workshop. This is a more important objective than an emphasis on research content. Putting gender on the health research agenda entails a conscious attempt to focus on the inequities in women's health and an emphasis on gendered health impacts.

It is important for health research to focus on women's health and on women as a group distinct from men, since women are generally family care-givers, household resource managers and the reproducers of society. The state of women's health and well-being contributes directly to the health and well-being of their families, especially children and the elderly, and thereby of the community as a whole.

Furthermore, it is important to put to the forefront what has too frequently been made invisible. Health research (other than reproductive health) is often carried out on male subjects and the results assumed to be relevant to both men *and* women. The emphasis therefore on women as a group, points to the urgency for health research to be more gender-specific, so that the needs of women can be more appropriately addressed by the health professionals.

Defining women's health

Women's health at this workshop will be defined in terms of woman's total well-being. This is a holistic approach encompassing all aspects of women's lives, not only their reproductive functions. It is therefore important to address women's total life cycle and the health needs of girl children and of elderly women.

Another way to ensure that women's health is defined holistically in health research is to look at women's life spaces and gendered responsibilities. Because women and men often play different roles in their communities, the life spaces women occupy within and outside their homes can be quite different from those environments and spaces occupied by men. These differing environments and their impact on women's health should be addressed when considering women's total health.

States of health as a consequence of certain development processes, the gender hierarchy and war

As stated earlier, states of well-being and ill-health are not separate from the wider societal, economic, environmental and political processes. Likewise, development processes too are affected by the levels of health of the people. Hence, to effectively and appropriately address health, research should also consider the wider frameworks of development, gender hierarchy and war.

The inter-relationship between development processes and health

At this juncture of history, there is an urgent need to work towards the rethinking of a new development paradigm that would be more equitable, socially just and ecologically sustainable. 'Development' programmes implemented in the last three decades in the Asia-Pacific region have, at least in intent, been attempts to direct developing countries toward the goals of economic growth, social development and debt servicing. These efforts have been seen as the way in which developing countries could work toward attaining the living standards of the developed world.

Unfortunately, the results of 'development' programmes and policies of the last three decades have been somewhat more complex and less straightforward than perhaps expected. The results of the 'trickle down' economic growth paradigm driving development programmes since the 1960s as well as the 'structural adjustments' programmes which emerged in the 1980s, have seemingly brought about increased economic growth. This, however, has come at a high price in terms of the overall well-being of large proportions of the populations of many developing nations. Health issues and the concern over diseases must therefore be contextualised within the deeply penetrating development programmes and policies that are being implemented. Development programmes which negatively impact on the environment and in turn have negative consequences on the health of the people whose lives these programmes set out to improve, cannot be considered sustainable.

The effects of development on health are, however, not one-sided. The health of the population and the equitable distribution of that health within the population also impacts upon the pace and form of development in a country. Hence when attempting to understand and evaluate development experiences within and between countries, it is important that health as an important variable is not overlooked.

Gender hierarchy and health

The gender hierarchy that exists in most societies has led to women's lack of access to equal rights; unequal opportunities to education and unequal distribution of land and access to resources. Women's status and the value of women's work have also been undermined. Furthermore, violence is being inflicted by states, institutions and individual men on women. These have untold consequences on women's health and the quality of women's lives. Health research and health policies cannot therefore ignore such structural inequalities with their deep-seated consequences. Also, this gender hierarchy impacts upon the consequences of development. For example, it is women who suffer most from the depletion of food supplies, and women, who, due to their multiple roles and responsibilities, are more susceptible to contracting certain tropical or environmentally related diseases.

Effects of war on health

Yet another factor which continues to affect the health of women and men, particularly in Cambodia, Vietnam and Laos, is the effects of war. Cambodia, for example, is one of the most densely mined countries in the world. Men continue to be maimed or killed as a result of bombs and mines left in the fields and villages. Women are left with the responsibility of looking after these victims of war as well as their fatherless families. In addition, women have to face the acute social and environmental consequences of war given their capacity as resource managers and providers for their families. The effects of these conditions on women's health should be addressed.

Workshop Programme

Monday, January 23

7.00-8.30 pm Welcome reception for visiting participants and distribution of travel allowances

Venue: IDRC lobby, 7th floor, RELC.

Tuesday, January 24

Opening Ceremony

9.00-9.15 Registration

9.15-9.30 Welcome by Dr Vivienne Wee
Programme Director
Centre for Environment, Gender and Development (ENGENDER)

9.30-9.45 Opening Address by Dr John Graham
Senior Regional Programme Officer
(Environment and Natural Resources) and
Member, IDRC Gender and Sustainable Development (GSD) Liaison
Committee
Representing Dr R.W. Spence
Regional Director, Asia Regional Office

9.45-10.00 Address by the Guest of Honour
Dr Kanwaljit Soin
Nominated Member of Parliament, Singapore
Director, Centre for Environment, Gender and Development (ENGENDER)

10.00-10.15 Address by SEAMEO Jasper Fellowship Awardee for 1994
Dr Violeta Lopez-Gonzaga
University of Philippines

10.15-10.45 Tea

Workshop

- 10.45-12.30 **Focus:**
Objectives of the workshop
Facilitator: Dr Annette Stark, Senior Regional Programme Specialist (Health)
- Background to the workshop:
*Ms Janet Hatcher Roberts, Senior Programme Specialist (Health)
Health Sciences Division, IDRC*
- Introduction and expectations of participants
- Discussion and adoption of agenda including:
—an introduction to a grid of workshop topics
—nomination of a drafting team of rapporteurs
- 12.30-2.00 Lunch
- 2.00-4.00 **Focus:**
Gender analysis: perspectives and methods
Facilitators: Dr Vivienne Wee and Dr Violeta Lopez-Gonzaga
- Plenary:
What, why and how? Concepts, aims and methods in gender analysis
- Small groups:
Role play
- Plenary:
Discussion of issues arising from the role play
- 4.00-4.15 Tea
- 4.15-5.00 Plenary:
—preview of the guiding questions for review of research issues through a gender lens
—preview of a proposal for the formation of a long-term research and action women's health network in Asia and the Pacific
- 6.30-9.30 *Welcome dinner hosted by IDRC
Bus will leave at 6.30 from RELC (Meeting point: RELC lobby at 6.30pm)
Venue: Lucky View Seafood Restaurant
1202 East Coast Parkway #01-04
Singapore 1544, Tel: 242 1011*

Wednesday, January 25

- 9.00-9.15 Highlights of the previous day (rapporteurs and facilitators)
- 9.15-10.45 **Focus:**
Contextualising health in
—**development processes**
—**the gender hierarchy**
—**society and culture**
Facilitators: Ms Janet Hatcher Roberts and Dr Vivienne Wee
- Plenary:
An overview
Country Case studies (3 presentations of 20 minutes each by participants - programme to be arranged)
Open discussion (30 minutes)
- 10.45-11.00 Tea
- 11.00-12.30 Small group discussions:
Contextualising health
Review of participants' research issues through a gender lens using the guiding questions provided.
- 12.30-2.00 Lunch
- 2.00-2.30 Plenary:
Report of small group discussions
- 2.30-3.15 **Focus:**
Linkages between health, gender and development
Facilitators: Dr Annette Stark
Ms Maria Ng Lee Hoon, Senior Regional Programme Officer
(Information Sciences and Systems)
- Plenary:
Case studies to highlight the linkages between health, gender and development
(2 or 3 presentations by participants - programme to be arranged)
- The health consequences of war
Communicable diseases
The health consequences of population policies
The health consequences of poverty
Other case studies
- 3.15-3.30 Tea
- 3.30-5.00 Small group discussion:
Linkages between health, gender and development
Review of participants' research issues through a gender lens using the guiding questions provided

Free evening

Thursday January 26

- 9.00-9.15 Highlights of the previous day (Rapporteurs and Facilitators)
- 9.15-10.00 **Focus:**
Linkages between health, gender and development
Facilitator: Dr Vivienne Wee
- Small group discussion continues
- 10.00-10.45 Plenary:
Report of small group discussions
- 10.45-11.00 Tea
- 11.00-12.30 **Focus:**
Research priorities, gaps, contexts and methods
Facilitator: Ms Janet Hatcher Roberts
- Small group discussions of country situations:
—where are the priority areas of research on gender, health and sustainable development?
—where are the gaps in research?
—why do these research gaps exist?
—what kind of research approaches and methods would be appropriate for these priority areas and research gaps?
- 12.30-2.00 Lunch
- 2.00-2.30 Plenary:
Report of small group discussions
- 2.30-4.00 **Focus:**
the formation of a long-term research and action women's health network in Asia and the Pacific
Facilitator: Dr Vivienne Wee
- Small group and plenary discussions of country situations:
—what are women's long-term health needs?
—to what extent are these needs being met?
—how can a regional research and action network help to meet these needs?
—what additions and amendments can be made to the proposal for such a network?
- 4.00-4.15 Tea
- 5.00-9.00 *Evening Tour of Chinatown*
Bus will leave at 5 pm from RELC (Meeting point: RELC lobby at 5 pm)
Please refer to page 10 for more details of the tour

Friday January 27

**Focus of the day:
presentation, discussion and adoption of draft report of the workshop
& future directions**

Facilitators: Ms Janet Hatcher Roberts and Dr Vivienne Wee

- 9.00-9.30 Presentation of the draft report (Rapporteurs)
- 9.30-10.45 Small group discussions of the draft report, focussing on strategies and recommendations to specific target groups:
—policy-makers
—research institutions
—teaching institutions
—professional bodies
—NGOs
—communities
—other groups
- 10.45-11.00 Tea
- 11.00-12.30 Plenary:
Report of small group discussions
- 12.30-2.00 Lunch
- 2.00-3.30 Plenary:
Integration and synthesis of the participants' contributions into the draft report (Rapporteurs)
- 3.30-3.45 Tea
- 3.45-5.00 Plenary:
Adoption of the draft report
Where do we go from here? Future directions of the network

Thursday Evening, 26 January 1995

Chinatown Tour Itinerary

5pm - 9pm Bus will leave RELC at 5 p.m.

*Visit the CHINAMAN SCHOLAR GALLERY
14B Trengganu Street*

*Visit the Centre for Environment, Gender and Development (ENGENDER)
14C Trengganu Street*

Conducted tour of Chinatown, Indian temple, chinese herbal shops, opera house

Visit an old-fashioned Chinese Peranakan house at 157 Neil Road. Built in the 19th century, the house with its gold carvings is one of the few surviving houses of its kind in Singapore.

Free and easy: dinner and shopping

Bus leaves Chinatown for RELC at 9 pm

Placing Gender on the Research Agenda: some Guiding Questions

Some guidelines

- The following are some questions you can use to aid you in evaluating the extent to which your research is gender-sensitive.
- Some questions may be more relevant to your particular area of research than others.
- Locate these questions in the community or communities you have studied.
- Draw out the health implications of these questions.
- Consider the relevance of these questions to your research in terms of conceptualisation, methods and analysis.

In your research, have you taken into consideration the following questions? Are you documenting these gender differences in your research? Have you analysed the health consequences of the gender asymmetry that exists between men and women?

A. Reproductive health and reproductive rights

1. What is the life expectancy of women relative to the life expectancy of men in the community or communities you have studied?
2. What are the maternal mortality rates in the community or communities you have studied?
3. What are the infant mortality rates in the community or communities you have studied?
4. How many children on average do women bear in the community or communities you have studied?
5. Is there a preference for sons relative to daughters?
6. What factors affect women's reproductive choices?
7. Who helps women during childbirth?
8. Is there any difference in the treatment of women who bear sons versus those who bear daughters?
9. How do women deal with unwanted pregnancies?

B. Nutrition

1. Who decides on what crops to cultivate, who farms them and who gets the money for the produce.
2. How would you compare the nutritional intake of boys and girls, men and women?
3. Who eats first, who eats last?
4. What cultural taboos are there surrounding menstruation, pregnancy and childbirth?
5. What factors affect gender-differentiated nutritional levels?
6. Do women suffer from specific health problems resulting from nutritional deficiencies, such as chronic anemia, night blindness, bone deformities, etc.?
7. What, if any, nutritional supplements are given to women during menstruation, pregnancy, lactation and menopause?

C. Environment

1. Do women and men in the community or communities you have studied occupy the same life spaces, given their often gendered socio-culturally determined roles and responsibilities?
2. Do the effects of environmental degradation have similar consequences on the health and livelihoods of women and men?
3. Do women and men possess the same knowledge about the environment? Is it the men or the women in the society who are often the primary resource managers?
4. What are the main contaminants in the environment? Do environmental pollutants and environmental disasters have similar consequences on the health of men and women?
5. Do women and men have the same rights, entitlements, access and control over land, habitat and resources? What are the consequences of unequal access to land and resources on women and on women's health?
6. Do women and men have equal access to the planning and management of the natural and built environment, the work and the home environment?

D. Work

1. What are women's hours of work and leisure, relative to men's time-use?
2. What constitutes women's work and men's work?
3. What are women's income levels compared to men's income levels?
4. In what sectors are women employed, compared to men?
5. What are women's economic assets, e.g. property, land, business enterprise, equipment, vehicles, luxury goods?
6. What are female literacy rates compared to male literacy rates?
7. What is the extent of women's physical mobility outside the home, compared to men's mobility?
8. What is the health impact of particular development processes on men and on women?

E. Violence and hazards

1. What is the incidence of violence against women in the community or communities you have studied?
2. What are the attitudes of society to women who are victims of violence?
3. What kind of health care is given to women who have suffered violence?
4. What occupational and environmental hazards do women face, as compared to men?

F. Health care

1. Who has the responsibility for providing the family with clean water, nutritious food, and a hygienic environment?
2. Who provides health care in the family? Who looks after sick babies and children, the handicapped and the elderly? Who looks after men when they fall ill? Who looks after women when they fall ill?
3. Who makes decisions for the family about the need to seek care outside the home?

4. The 1977 Plan for Health Care Services in India states "Indian mothers, like mothers elsewhere, are selfless and ready to sacrifice anything for the welfare of their family." What are the health consequences of such "sacrifices" to the women themselves?
5. What are the attitudes of society to women who are ill, menstruating, pregnant, post-natal, lactating or menopausal? What kind of health care is there to address their health needs in these specific conditions?
6. What taboos are there in talking about women's health problems?
7. Who are the health practitioners providing health care to the community or communities you have studied?
8. What factors affect women's access to health information and facilities?

In addition to the questions above, draw out some other significant gender-related questions based on your research experience.

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Biographic Information of Participants

Shafiul A. Ahmed (Mr.) is Environmental Engineer at the Environmental Health Programme, the International Centre for Diarrhoeal Disease Research, Bangladesh. His professional career includes experience as a Hydrologist, as well as socio-environmental research on the impact of irrigation projects. Mr. Ahmed has a BS in Civil Engineering from Texas A&M University (USA) and an MS in Civil (Environmental) Engineering from the University of Texas at Austin (USA).

Ni Ni Aye (Dr.) is Leader of the Maternal and Child Health Team at the Urban Health Centre (Dawei) in Myanmar. Prior to this, Dr. Aye was an assistant civil surgeon in the Civil Hospital in Dawei. [Further information was not available at time of printing.]

Nguyen Thi Hoa Binh (Ms.) is currently working with the Vietnam Women's Union. She started her career as Program Officer of the Maternal and Child Healthcare and Family Planning program. She has been working with the UNFPA on family planning projects since the 1980s, providing support to commune-based women's groups and currently on the developing family planning training curricula and manuals for motivators. She was also Manager of the "Family Planning for Everyone" project funded by the Population and Community Development Association in Thailand. Ms. Binh has her BS in Gynaecology from the Hanoi Medical School.

Boungnong Boupna (Dr.) is Chairperson of the Council of Medical Sciences at the Ministry of Health and is also a Member of the Executive Committee of the Lao Women's Union. She has been the Director of the School of Medicine in Luangprabang and Vice Director of the University of Health Sciences in Vientiane, lecturing on respiratory physiology and semiology, respiratory disease treatment and immunology. Dr. Boupna has an MD, a Ph.D. in Pneumology and Allergy studies, and a certificate for advanced courses in public health (Moscow).

Thora Broughton (Ms.) is Counselor, Development, for the Canadian High Commission in Singapore. She has extensive experience in Asia and with CIDA addressing industrial cooperation and development issues. She has a B.A. in Political Economy from the University of Toronto (Canada).

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Surekha Cohen (Ms.) is an international health and development program management consultant. Her professional experience includes global projects on child survival and micronutrient malnutrition (iron, vitamin A, and iron) funded by the U.S. Agency for International Development. Ms. Cohen has an M.A. in International Affairs specialising in international health and economic development from the George Washington University (USA).

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Esperanza Espino (Dr.) is Head of the Department of Parasitology and Medical Entomology at the Research Institute for Tropical Medicine (RITM), the Department of Health in the Philippines. She is also Consultant for Pediatric Infectious Diseases and Head of the Malaria Study Group at RITM. In addition, Dr. Espino is Assistant Professor in Pediatrics at De La Salle University College of Medicine. She has worked extensively on research studies and programs concerning the detection, control, and social and economic impacts of malaria. Dr. Espino received her BS in Zoology at University of the Philippines Los Banos and her MD at De La Salle University College of Medicine (Philippines).

Nansaljav Gerelsuren (Mrs.) is President of the Mongolian Women's Federation. Prior to this she served as Assistant to the President of Mongolia and worked for many years with the Central Committees of the Mongolian Trade Union and Mongolian Revolutionary Party. Mrs. Gerelsuren has a Diploma in Chemistry from the Mongolian National University and had a Diploma in Politics from the Political Institute of Moscow.

John Graham (Mr.) is Senior Regional Programme Officer of Environment and Natural Resources at IDRC's Asia Regional Office. He is also a member of the IDRC Gender and Sustainable Development Liaison Committee. [Further information not available at time of printing.]

Sandy Halley (Ms.) is Chairman/Commissioner of the Private Health Insurance Administration Council, which manages reinsurance and monitors the financial performance of private health insurance funds. She was also Chair of the Health Forum at the Australia/ASEAN Business Woman's Trade Mission in Singapore and developed OESTRA, the Organisation of Education and enterprise, Service delivery, Testing, training and Research in health care for Australia/ASEAN women. Ms. Halley's professional background includes urban and regional planning, compensation programmes and human resources development, and social policymaking. She has a Bachelor's degree in Social Work from the University of New South, a Master of Town and Country Planning from the University of Sidney and an MBA from the Australian Graduate School of Management.

Chika Hyodo (Ms.) is a Member of Japan's Network for Women and Health, an organisation established to articulate the views of women in Japan at the International Conference on Population and Development, Cairo, September 1994. The Network is now working towards the 4th United Nations World Conference on Women in September 1995 with the purpose of articulating concerns about population issues and environmental problems as members of the world community. Ms Hyodo is currently a post graduate student at the University of Tokyo working on a Ph.D. in Health Education.

Mehraj Jahan (Dr.) teaches at the American College (Singapore). She is also Co-ordinator of the Women and Law Program/Project of Women Living Under Muslim Laws Network (Singapore). She has been involved in the activities of ENGENDER; AWARE, the Association of Women for Action and Research (Singapore); and

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Lori Jones Arsenault (Ms.) is Research Officer in the Health Sciences Division at IDRC, Ottawa. Ms Jones has a BA from Trent University, Canada and an MA from the Norman Patterson School of International Affairs at Carleton University, Canada.

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Thicumporn Kuyyakanond (Dr.) is Associate Professor and Head of the Department of Microbiology at the Faculty of Medicine, Khon Kaen University in Thailand. Her research includes studies of the microbiology of infectious diseases (such as vibrio cholerae) and articles on AIDS. In addition, she lectures on microbiology to students in all the health professions. Dr. Kuyyakanond has an MSc in Microbiol. Chem from the University of Newcastle upon Tyne (UK) and a PhD in Bacteriology and Virology from the University of Manchester (UK).

Aileen Kwa (Ms.) is a Research and Administrative Officer at ENGENDER. Her areas of research so far have been on ethnicity, feminist and state theory. One of the main projects she is presently working on at ENGENDER is the global women's movement and the implications of its current path-breaking claims on political space in the international arena. Her research interests also include gender and development economics, environment, health, human rights and peace issues. Ms. Kwa graduated with an M.A. in Education from the University of Auckland (New Zealand).

Leong Keng Hong (Dr.) is a medical doctor and Clinical Teacher on the Faculty of Medicine, National University of Singapore. He is also a Consultant to the Department of Rheumatology and Immunology at Tan Tock Seng Hospital (Singapore). He is involved with several special programmes at Tan Tock Seng Hospital: the Osteoporosis Programme, a multidisciplinary effort using nurse educators and the interaction of specialists managing osteoporosis; the Arthritis Clinic integrating occupational and physiotherapists and patient education in an outpatient setting; and the Shared Care Programme to encourage co-management of patients by the rheumatologist and primary care physician. Dr. Leong has an MBBS (Singapore), and a Master of Medicine (Internal Medicine). He is a Member of the Royal College of Physicians (UK) and Fellow of the Academy of Medicine (Singapore).

Violeta B. Lopez-Gonzaga (Dr.) is Executive Director of the Institute for Social Research and Development at the University of St. La Salle (Bacolod) in the Philippines. She is also consultant to the Development Academy of the Philippines Environment Natural Resource Committee. Her current research includes training and action planning for environmental protection and community resources management at Manapia, Negros Occidental; a case study analysis of sustainable rural workers development at a sugar workers co-operative; and a process documentation and situation analysis of the Northern Negros geothermal exploration. Dr. Lopez-Gonzaga is Founder and President of the Social-Legal Development Foundation (SOLEDEV). She has an MA in Asian Studies from the University of the

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Beth Mastel-Smith (Ms.) holds a B.Sc. in Nursing and an M.Sc. in Health Education. She is currently sole proprietor of Stayfit Consulting, providing individual training, weight management and organisational consulting. Ms. Smith has co-ordinated clinical research trials on osteoporosis, exercise and cancer prevention. She also managed fitness facilities for the Whitworth College Faculty in Spokane (USA) developing physical activity programs for all age groups.

Neang Ren (Ms.) is a Midwife Educator. She is currently working with the Human Resource Department of the Ministry of Health in Cambodia to develop national consensus on the roles, responsibilities and education required for all categories of healthcare providers. She is President of the Cambodian Midwives Association. Her professional experience includes skills upgrading for nurses and midwives. Ms. Neang is qualified as a secondary midwife and teacher of midwifery methodology.

Maria Ng Lee Hoon (Ms.) is Senior Regional Program Officer responsible for Information and Communication Sciences and Systems at the IDRC's Asia Regional Office. She is currently leading the IDRC computer networking and data communication program called "Pan Asia Networking" to be launched in February 1995. Prior to joining IDRC in 1976, she worked for several years at the Central Library of the National University of Singapore and before that at the Singapore Ministry of Defence and Armed Forces Training Institute Libraries. Ms. Ng is a Chartered Librarian by training.

Ng Yen Yen (Senator Dr.) is a medical doctor and appointed Senator to the Malaysian Parliament. She is also on the Board of Directors of the Women's Institute of Management, the first such institute in the region, and is a member of the Malaysian Child Resource Centre a non-profit organisation concerned with the welfare of children in Malaysia. Senator Dr. Ng has an MBBS from the University of Malaya and a post graduate diploma in Reproductive Medicine from the Johns Hopkins University (USA). She is currently completing a Masters in Sociology in Leisure Recreation at the University of South Australia focusing on occupational safety and health.

Nguyen Ngoc Nga (Dr.) is Deputy Director of the National Institute of Occupational and Environmental Health in Hanoi. She is responsible for organising and managing all occupational health programs in Vietnam. She also conducts research on occupational and environmental health issues, including studies on women at work in Vietnam, and is Vice Chief of research in this area at the Ministry of Health. Dr. Nga also serves as a part-time faculty member at the Hanoi Medical College. She has an MD and specialisation in Occupational Health from Hanoi Medical College as well as a post graduate certificate in health management from the Hanoi College of Public Health.

Julia Oh (Ms.) is a Registered Nurse who has become involved in international development, particularly gender issues in research and in developing countries. She is also interested in Asian arts and cultural issues and has volunteered for many years with the National Museum (Singapore). Prior to this, she worked as a State Registered Nurse in London. Ms. Oh is currently completing a BA in Anthropology and Development Studies at Deacon University (Australia).

Kasil Oh (Dr.) is Professor, Chief of the Division of Child Health Care Nursing, and Dean of Academic Affairs for the Graduate Program at Yonsei University's College of Nursing in Seoul. Her professional career began as a nurse and lecturer following which she became professor and dean of academic affairs for Yonsei University College of Nursing. Dr. Oh is an RN with a Ph.D. in Nursing from the Texas Woman's University, College of Nursing, Denton (USA). She also holds an MS in Maternal and Child Health from the Boston University School of Nursing

Trinidad Osteria (Dr.) is Director of the Social Development Research Centre, Professor in the Behavioural Sciences Department and Professorial Chairholder in Asian Studies, both at De La Salle University in the Philippines. She began her career addressing population issues and has become involved in a variety of health policy and planning efforts throughout Asia. Dr. Osteria has a BSc in Hygiene (Public Health) and an MA in Demography from the University of the Philippines. Her PhD is in Demography from the Johns Hopkins University (USA).

Bounlay Phommasack (Dr.) is Deputy Director of the Department of Public Health, Vientiane, Lao PDR. She recently led a successful community-based control program for dengue haemorrhagic fever (1985-1994) and has worked to strengthen the "Model Health Center" for implementing primary health care programs in Vientiane. She was responsible for introducing a cost recovery system, in particular a drug revolving fund, at the health centre level. Dr. Phommasack has an MD from the University of Health Sciences (Vientiane) and an MPH from the Institute of Tropical Medicine (Belgium).

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Janet Hatcher Roberts (Ms) is Senior Program Specialist for Health Systems at the Health Sciences Division of IDRC in Ottawa. She holds a degree in Anthropology, Nursing and an MSc in Epidemiology. Prior to joining IDRC in 1992, she was a Deputy Director of Research and Evaluation for the Canadian Royal Commission on New Reproductive Technologies. Her work experience has been in health policy, environmental and occupational health in federal and provincial government settings as well as Assistant Professor at Queen's University, Canada.

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Nutan Singapuri (Ms.) is Research and Administrative Officer for ENGENDER working on gender issues in the context of economic development. She began her professional career in marketing and public relations but decided to turn her attention to socio-economic research focusing on gender concerns. Ms. Singapuri has a Bachelor of Social Sciences (Honours) in Sociology from the National University of Singapore.

Kanwaljit Soin (Dr.) is an Orthopaedic and Hand Surgeon and has been a Nominated Member of Parliament (Singapore) since 1992. She is also on the Board of Directors of ENGENDER. Dr. Soin has been working as a surgeon since 1975 but has also been very involved with women's issues for at least ten years. She was a founding member of AWARE, the Association of Women for Action and Research (Singapore), and served as President for two years. She was also recipient of the Woman of the Year award in 1992. Dr. Soin has an MBBS (Honours) and an MMed in Surgery.

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Nancy Spence (Ms.) is Deputy Executive Director of the Canada ASEAN Centre in Singapore. This position involves several responsibilities including Academic Support Co-ordinator and Director of the Businesswomen's Program as well as Director of the CanAsian Businesswomen's Network, established to augment the role of women in trade between Canada and the ASEAN countries. She is also Women in Development Co-ordinator for the CIDA Asean Regional Program and managed the integration of WID into CIDA's regional projects, including Gender Analysis training as required. Ms. Spence has an Masters in International Affairs (Development) and a Masters in Education (Adult), as well as Teaching Certification (primary, secondary, ESL).

Annette J. Stark (Dr.) is the Senior Regional Program Specialist responsible for the health research area at IDRC's Asia Regional Office. Prior to joining IDRC seven years ago, she worked for ten years at the University of British Columbia as Director of the Division of Health Services Research and Development and Associate Professor in the Department of Health Care and Epidemiology, Faculty of Medicine. Her research focused on health manpower planning, resource allocation and program evaluation. Her professional background is Community Health Nursing with a PhD in Epidemiology from the University of North Carolina (USA).

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Veena Tandon (Dr.) is Professor and Head of the Department of Zoology at the School of Life Sciences, North-Eastern Hill University (Shillong) in India. She has a BSc, MSc, and PhD in Zoology from Panjab University (India). She has been a professor for twenty years and has been conducting research for twenty-six years. Dr. Tandon's research interests include helminth parasites in edible animals, the ecology and biology of monogenean parasites of *anuran amphibia* and the transmission dynamics of directly transmissible infections.

Mary Ann Tsao (Dr.) is a medical doctor and heads the Tsao Foundation (Singapore). [Information was not available at time of printing.]

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Cynthia Veneracion (Ms.) is a Research Associate at the Institute of Philippine Culture and Lecturer in the Department of Sociology and Anthropology at Ateneo de Manila University in the Philippines. Her professional experience includes research on community-based strategies for primary health care programs and strategies to manage endemic tropical diseases, as well as issues of management and gender in the development of farming and irrigation systems. Ms. Veneracion has an AB in Journalism and an MA in Asian Studies from the University of the Philippines.

Khieu Serey Vuthea (Dr.) is Director of the Women's Health Department at the Secretariat of State for Women's Affairs in Cambodia. Prior to this she was a physician at the National Anti-Tuberculosis Centre at the Ministry of Health. Dr. Vuthea received her MD from the Faculty of Medicine in Phnom Penh.

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Vivienne Wee (Dr.) is Programme Director and Co-founder of ENGENDER. For the past twenty years, she has been doing research on issues related to long-term structures and short-term changes. She has worked particularly on the interface between traditional societies and modern nation-states in East and Southeast Asia. She is also a founder of AWARE, the Association of Women for Action and Research (Singapore). She formerly co-ordinated a task force of government and non-government representatives to stop violence against women. Dr. Wee did her Masters focusing on Chinese religion at the National University of Singapore and received her PhD in (Anthropology) from the Australian National University.

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Josie Zaini (Ms.) is a social activist involved in issues related to women workers, farmers and consumers. She works on a wide range of issues including environment, pesticides, consumer protection and health. She is currently President of the Education and Research Association for Consumers (ERA), as well as advisor to the Labour Resource Centre (LRC) and several unions on Gender and Environment. She has published a Training Manual on Women and Environment and comic books on child labour. Ms. Zaini holds a Masters degree in Development Management.

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International Development Research Centre (IDRC)

The International Development Research Centre is a public corporation created by the Parliament of Canada in 1970 to support technical and policy research designed to adapt science and technology to the needs of developing countries. The Centre's five programme sectors are Environment and Natural Resources, Social Sciences, Health Sciences, Information Sciences and Systems, and Corporate Affairs and Initiatives. The Centre's funds are provided by the Parliament of Canada; IDRC's policies, however, are set by an international Board of Governors. The Centre's headquarters are in Ottawa, Canada. Regional offices are located in Africa, Asia, Latin America, and the Middle East.

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Centre for Environment, Gender and Development (ENGENDER)

The Centre for Environment, Gender and Development is an autonomous regional organization engaged in innovative thinking on environment, development and gender issues. Formed in 1992, ENGENDER sees itself positioned at a crucial stage in development history and in a geographical hinterland that is undergoing tremendous social, economic and political change. This climate of change has produced heightened interest in reviewing alternatives to current development strategies, aimed in a way to prevent mistakes of past development models. Of particular focus are the issues of equity and sustainability in the context of the alarmingly fast rate of resource consumption.

Since neither the natural environment nor economic development are static entities enclosed within national boundaries, ENGENDER has, as its broad focus, the environmental, gender and social impact of development processes in the Asian and Pacific region. ENGENDER networks with governmental and non-governmental bodies, policy-makers as well as indigenous communities in the region, to achieve this aim of sustainability through a more gender-sensitive and environmentally-friendly development approach.

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